INFORMATION DISCLOSURE STATEMENT BY APPLICANT						Complete if Known						
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						Na	med Inventor	Richard LESKE				
						p A	Art Unit	1638				
						nin	er Name	D. Fox K. Robinson				
Sheet	Sheet 1 of 1					Attorney Docket Number 1760-289						
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			ent Documer									
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Examiner Signature		Kei	te c	). Pu	in	u	an.	Date Considered	004	ober 6, 200	54	

\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. 
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